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#### 2015 Defense Health Information Technology Symposium

#### Synchronization of EHR Modernization















#### **DHA Vision**



"A joint, integrated, premier system of health, supporting those who serve in the defense of our country."



#### PEO DHMS



The mission of the Defense Healthcare Management Systems (DHMS) Program Executive Office (PEO) is to efficiently improve healthcare for the active duty military, veterans, and beneficiaries by modernizing the Electronic Health Record (EHR) for the Military Health System (MHS) and establishing seamless medical data sharing between the Department of Defense (DoD) and Department of Veterans Affairs (VA), and the private sector.



#### **Learning Objectives**



- Understand the MHS' plan and strategy to synchronize activities
- Understand the Workstream Steering Committee structure, including broad roles and responsibilities
- Understand the interaction between the Functional Champion, Acquisition (PEO DHMS) and Sustainment (DHA HIT)
- Utilize milSuite for coordination, user engagement and crowd sourcing

## Agenda



- Background
- Guiding Principles
- MHS EHR Synchronization
- Workstream Steering Committee (WSC) Construct and Framework
- WSC Way-Ahead

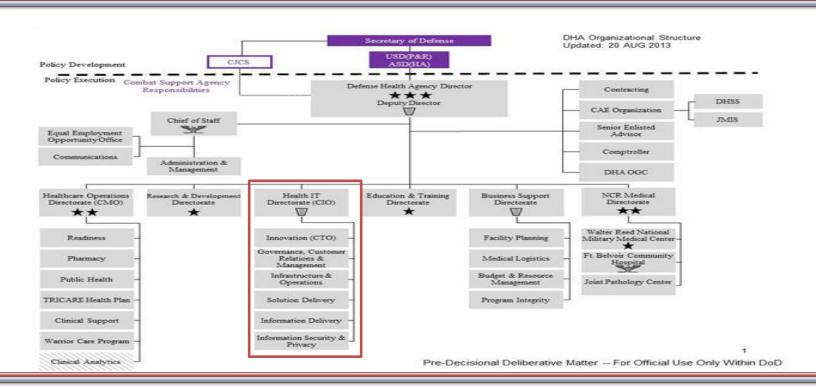
#### Background



- DoD to acquire a new Electronic Health Record (EHR) to replace current legacy systems including Outpatient, Inpatient, and Theater
- Strategy is to leverage industry:
  - Integrator
  - EHR best of suite, off the shelf, open architecture
- Initial Operating Capability (IOC) planned for the Puget Sound in Dec 2017
- Under Secretary of Defense for Acquisition, Technology and Logistics (USD AT&L) has acquisition lead Program Executive Office, Defense Healthcare Management Systems (PEO DHMS)
- Complex Military Heaulth System Environment
  - □ DHA
  - □ Services
  - □ DoD

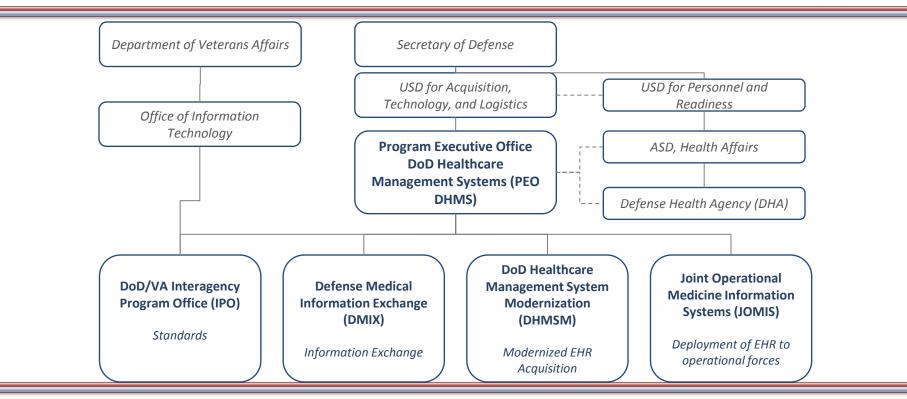
## **Defense Health Agency**





#### Where We Fit





## **Industry Experience**



Risks to
EHR
Deployment

Lack of Standardization

Lack of Agile
Decision Making

Poor Governance Process

Ineffective Communication



## EHR Modernization Guiding Principles







- Provide a flexible and open, single enterprise solution that addresses both garrison and operational healthcare
- >> Facilitate clinical business process reengineering, adoption, and implementation over technology
- Configure not customize
  - Based decisions on the MHS as a whole not a single individual area

- Driven by frontline care delivery professionals
- Orive toward rapid decision making to keep the program on time and on budget
- Provide timely and complete communication, training, and tools to ensure a successful deployment
- Build collaborative partnerships outside the MHS to advance national interoperability
- Enable full patient engagement in their health

#### **EHR Modernization: Key Players**



To deliver a modernized EHR to the military garrison and operational points of care and transform how the military health system provides healthcare, the Services, DHA and Acquisition Teams will collaboratively work with the care locations to configure, test, train and deploy the new solution.

Deploy to 1,200+ Care **Acquisition PEO DHMS** Locations **Solution Delivery &** Infrastructure Modernized **DHA HIT Business Processes EHR** & Requirements **Functional Champion** & 140,000+ **Site Preparation** providers Services across the globe

## **MHS Synchronization**





## MHS EHR Synchronization



- Task from Senior Leadership to clarify roles and responsibilities
  - □ 33+ Organizations
  - Dynamic environment
- RASCI construct
  - □ <u>R</u>esponsible
  - □ Accountable
  - □ <u>Supporting</u>
  - Consulting
  - □ <u>I</u>nformed



#### **EHR Synchronization WSCs**



- Utilized high level workstreams (9)
  - □ Each with initial implementation tasks to drive RASCI
  - ☐ Tasks will likely change
- 33+ Organizations
  - □ DHA HIT Divisions, PEO DHMS, DHMSM, Services, DHA, etc.
- ROC Drill Nov 2014 with Deputy Surgeons General

Work Stream	High Level Tasks
Acquisition, Gov & PM	33
Data*	TBD
STRATCOM*	TBD
Technical	67
Product Configuration	27
Test & Evaluation	15
Change Management	17
Training	21
Deployment / Activation	15

<sup>\*</sup> Added Later

#### **Workstream Steering Committees**



Workstream	WSC Co-Leads
Acquisition, Governance, and	Tim Thate (DHMSM), Dr. Dan Magee (DHA HIT), and CAPT Michael
Program Management	Meier (FC)
Technical	Jim Bates (DHMSM Eng) and Dr. Pete Marks (DHA HIT)
Product Configuration	Jim Bates (DHMSM Eng) and Dr. Pete Marks (DHA HIT)
Change Management	COL Jacob Aaronson (DHMSM) and CAPT Michael Meier (FC)
Test and Evaluation	Dr. Greg Guernsey (DHMSM T&E) and Dr. Brian Jones (DHA HIT)
Training	LCDR Kent Bui (DHMSM) and Dr. Brian Jones (DHA HIT)
Deployment / Activation	Len Cayer (DHMSM) and Dr. Brian Jones (DHA HIT)
Strategic Communications	COL Nicole Kerkenbush (PEO DHMS) and Craig Ratcliff (DHA)
Data	Heather Burke (PEO DHMS) and Andy Anderson (DHA HIT)

#### **Tasks to Workstream Steering Committees**



Example: **Deployment / Activation** 

Workstream

- Clarify initial tasks
- Identify new tasks
- Assigned RASCI to each task

RASCI results drove permanent Workstream Steering Committees (WSC)

- Standing group
- Maintain synchronization
- Make decisions
- Improve communication

Co-Leads: Len Cayer (DHMSM) and Dr. Jones (SDD)

Responsible: DHMSM PM Accountable: PEO DHMS

#### Supporting:

- DHMSM Deployment & Training (DHMSM D&T)
- DHMSM Systems Engineering and Infrastructure (DHMSM SE&I)
- DHMSM Testing (DHMSM Test)
- DHA HIT Infrastructure & Operations (DHA HIT I&O)
- DHA HIT Solution Delivery Division (DHA HIT SDD)
- Services (Services' Functional Champions)
- IOC Leadership (IOC)

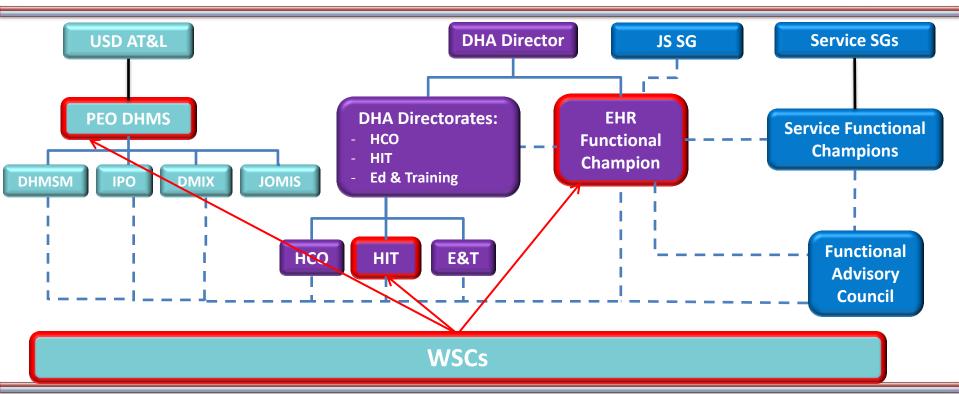
#### **EHR Synchronization Framework**



- Resulting work is a framework for support and coordination
- WSC provide:
  - □ Agile O-5/O-6 level decision making
  - Coordination
  - □ Subject matter expertise to governance, policy decisions, etc.
- Not replacement for existing organizational missions
  - □ For example:
    - DHMSM is Responsible for Deployment
    - SDD, I/O, Services must support
- Monthly all-day EHR Synchronization meetings
- Quarterly updates to Deputy Surgeons General

## **EHR Synchronization**





### **EHR Synchronization Way Ahead**



- Integration with contractor
- WSC adjustments
- Assessment of implementation tasks
- Maintain synchronization



## **Questions?**



#### **Evaluations**



■ Please complete your evaluations

#### **Contact Information**



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